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PTO/SB/01 (12-97)
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Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63) <input checked="" type="checkbox"/> Declaration Submitted with Initial Filing OR <input type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16(e)) required)	Attorney Docket Number	20191-707
	First Named Inventor	Iliah Nourbakhsh
	COMPLETE IF KNOWN	
	Application Number	Not Yet Assigned
	Filing Date	Herewith
	Group Art Unit	Not Yet Assigned
	Examiner Name	Not Yet Assigned

As a below named Inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

METHOD AND APPARATUS FOR LONG-RANGE PLANNING

(Title of the Invention)

the specification of which

☒ is attached hereto

OR

☐ was filed on (MM/DD/YYYY)

as United States Application Number or PCT International

Application Number ☐ and was amended on (MM/DD/YYYY) ☐ (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/028 attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(h) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	
60/261,052	04/02/2001	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/028 attached hereto.

(Page 1 of 3)

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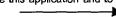
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DECLARATION — Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of the application is not designated in the prior United States or PCT international application in the manner provided by the first paragraph of 31 U.S.C. 112. I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application or PCT Parent Number**Parent Filing Date
(MM/DD/YYYY)****Parent Patent Number
(if applicable)**
☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/028 attached hereto

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith: ☐ Customer Number 

OR

☐ Registered practitioner(s) name/registration number listed below

 Place Customer
Number Bar
Code Label here
Name**Registration
Number****Name****Registration
Number**
☐ Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

 Direct all correspondence to: ☒ Customer Number or Bar Code Label
OR ☐ Correspondence address below**Name** Michael C. Martensen**Address** Wilson Sonsini Goodrich & Rosati**Address** 650 Page Mill Road**City** Palo Alto**State****CA****ZIP**

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650-493-6811

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:
☐ A petition has been filed for this unsigned inventor
Given Name (first and middle (if any))**Family Name or Surname**

Iliah

Nourbakhsh

Inventor's Signature
Date

6/27/2001

Residence: City

Pittsburgh

State

PA.

Country

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Citizenship

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Post Office Address**City**

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State

PA.

ZIP

15217

Country

USA

☒ Additional inventors are being named on the 1 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto:

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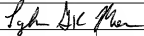
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DECLARATION	ADDITIONAL INVENTOR(S) Supplemental Sheet Page <u>3</u> of <u>3</u>
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Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name or Surname			
Tyler				Morse			
Inventor's Signature						Date	6-27-01
Residence: City	Brisbane	State	CA.	Country	USA	Citizenship	USA
Post Office Address							
Post Office Address 421 Alvarado St.							
City	Brisbane	State	CA.	ZIP	94005	Country	USA
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name or Surname			
David				Andre			
Inventor's Signature						Date	
City	Berkeley	State	CA.	Country	USA	Citizenship	USA
Post Office Address 1821 Sacramento Street							
Post Office Address							
City	Berkeley	State	CA.	ZIP	94702	Country	USA
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name or Surname			
Ofer				Matan			
Inventor's Signature						Date	
City	Palo alto	State	CA.	Country	USA	Citizenship	USA
Post Office Address 310 Palo Alto Avenue							
Post Office Address							
City	Palo Alto	State	CA.	ZIP	94301	Country	USA

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DECLARATION	ADDITIONAL INVENTOR(S) Supplemental Sheet Page 3 of 3
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Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name (first and middle (if any))			Family Name or Surname			
Tyler			Morse			
Inventor's Signature					Date	
Residence: City	Brisbane	State	CA.	Country	USA	Citizenship USA
Post Office Address						
Post Office Address 421 Alvarado St.						
City	Brisbane	State	CA.	ZIP	94005	Country USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name (first and middle (if any))			Family Name or Surname			
David			Andre			
Inventor's Signature					Date 7/2/1	
City	Berkeley	State	CA.	Country	USA	Citizenship USA
Post Office Address 1821 Sacramento Street						
Post Office Address						
City	Berkeley	State	CA.	ZIP	94702	Country USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name (first and middle (if any))			Family Name or Surname			
Ofer			Matan			
Inventor's Signature					Date	
City	Palo alto	State	CA.	Country	USA	Citizenship USA
Post Office Address 310 Palo Alto Avenue						
Post Office Address						
City	Palo Alto	State	CA.	ZIP	94301	Country USA

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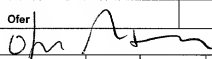
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DECLARATION	ADDITIONAL INVENTOR(S) Supplemental Sheet Page <u>3</u> of <u>3</u>
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Name of Additional Joint inventor, if any:								<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))						Family Name or Surname					
Tyler						Morse					
Inventor's Signature						Date					
Residence: City		Brisbane		State		CA.		Country		USA	
Post Office Address											
Post Office Address		421 Alvarado St.									
City		Brisbane		State		CA.		ZIP		94005	
Country		USA		Citizenship		USA					
Name of Additional Joint Inventor, if any:								<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))						Family Name or Surname					
David						Andre					
Inventor's Signature						Date					
City		Berkeley		State		CA.		Country		USA	
Post Office Address		1821 Sacramento Street									
Post Office Address											
City		Berkeley		State		CA.		ZIP		94702	
Country		USA		Citizenship		USA					
Name of Additional Joint Inventor, if any:								<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))						Family Name or Surname					
Ofer						Matan					
Inventor's Signature						Date		6-27-01			
City		Palo alto		State		CA.		Country		USA	
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